

She
Looked
Clean



BUT...

IN World War I, venereal diseases were responsible for 357,969 casualties, 100,000 more than the number of men killed and wounded in action. Approximately 10 percent of all hospital admissions during the entire war were attributable to gonorrhea or syphilis. Venereal disease casualties cost the Army 7,000,000 days of service. Only "flu" exceeded venereal disease as a cause of loss of time from duty. Venereal disease ranked fourth as a cause of permanent disability requiring discharge from service.

Out of the first 2,000,000 men physically examined for Selective Service in World War II, 95,000 had syphilis.

From 1940 to 1942 inclusive, newly contracted venereal disease infections were responsible for more than 300,000 servicemen being incapacitated for a total of 4,000,000 days. It is impossible to compute the toll of manpower days taken from the ranks of essential war workers by gonorrhea and syphilis.

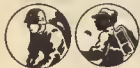
THE prostitute or "good-time" girl can put you out of business.

Whether you operate a hotel or a taxicab, whether you're a bellboy or a doorman, whether you run a tavern or a bar—doing business with these saboteurs is *bad* business—bad for you, bad for your customers, bad for the Nation.

Why?—because the prostitute and the "good-time" girl are usually carriers of disease and disablement—of syphilis and gonorrhea.

Syphilis is one of the worst killers loose in the world today. If you want proof, listen to this:

During the 26 months from Pearl Harbor to February 7, 1944, the Germans and the Japanese killed 36,000 Americans—*syphilis* killed 33,000 Americans at



For every man the enemy puts out of action—she puts out three. Seven out of ten prostitutes and promiscuous women are diseased.



home during the same time. In those 26 months, 45,545 Americans were wounded by enemy action—but somewhere between 20 and 40 times as many Americans, from 1,000,000 to 2,000,000 were attacked — wounded — by venereal diseases.

These diseases do many times more damage than smallpox. You wouldn't put yourself and your business in the way of spreading that kind of plague. Is this any different—except that it's a lot worse?

You wouldn't think much of a Government that didn't protect people from smallpox or other epidemics. That's exactly why the United States Government is after these two diseases—to stop the spread of syphilis and gonorrhea.

These public enemies are being policed by a score of Government agencies—city, county, State, and Federal, including the Army and Navy. They are determined to enforce every law, ordinance, and regulation that can help to lick them.

Your Government knows that around 95 percent of the hotels and taverns and taxicabs in this country are on the level—and that the other 5 percent are violating the law—playing with dynamite.

Dynamite that can ruin a man's business!

Suppose a cab driver, a bellboy, or bartender procures a prostitute for a man in uniform, who, as a result of this contact, picks up a venereal disease, look what happens:

That man in service is asked to

name or describe the woman, the person who procured her for him or told him where to go, the place where he met the procurer or the woman, and the place of exposure.

Civilians applying to public health clinics for venereal disease treatment are asked the same questions.

This information goes directly to the local health officer. He, in turn, gives information as to procurer, place of procurement, and place of exposure to police, liquor control officers, and others who have authority to license and prosecute. In the case of offending cab drivers it also goes to the Office of Defense Transportation, which has authority to "re-tailor" or revoke Certificates of War Necessity.

That kind of record is no business

"WHO GOT THE WOMAN FOR YOU?
"WHERE'D YOU MEET HER?
"WHERE'D SHE TAKE YOU?
"WHOM DID YOU PAY?"





asset—it can lead to refusal to renew a license or to immediate revocation of a license; it can mean loss of a job; it can put a business "off limits" and,

often, out of business; it can rate prosecutions and jail sentences and heavy fines.

It can—and often does—wreck the

business of those who think they can "get away with something." Many hotels, bars, and taxicab companies have been closed or ruined financially because they didn't believe that "this means you."

But the damage doesn't stop there—your whole industry suffers.

Operators who cater to the known prostitute or employ "B" girls to push the sale of drinks may think it's nobody's business but their own. But actually it's everybody's business—the public's business because of the spread of venereal disease, and the tavern keeper's business because the whole industry suffers community disfavor.

The decent law-abiding operator is tarred with the bad name of the



"Sorry, Sailor, but every cab in town is off limits. Some drivers were caught hustling."

guilty. A few offending cab drivers, bellboys, bartenders, and waiters can wreck the reputation and the legitimate business of many.

Self-policing is the best attack.

Knowing this, the trade associations and organizations which represent your business have set down policies and rules for your protection.

Find out what these regulations are. Follow them. Know what steps you can take—to bar these saboteurs from your place of business; to warn your patrons; to fight these disease carriers.

Self-policing is in your own interest. It protects your job, your business, your town.

It does more than that—it helps protect the Nation.

The million or more of your fellow Americans knocked out temporarily or permanently by these diseases in the last two years mean just so much manpower lost to the war—

Workers who should be manning the production line of war industry—fighting men who should be storming the beachheads and the battle lines for victory.

Do you want to be a party to keep-



In 1943 the Navy admitted to sick list, because of venereal disease, enough men to man a fleet.

ing even a single war worker from his job—to dropping even a single soldier from the ranks?

Navy casualties from venereal disease during 1943 were enough to have manned a fleet of 12 battleships, 6 carriers, 24 cruisers, and 80 destroyers; Army casualties were enough to have formed approximately 26 complete combat divisions with all their attached troops.

It costs from \$7,000 to \$35,000 to train *one man* for the fighting forces. Your taxes and War Bonds help to pay for his training.

Does it make sense to invest in training him—and then expose him wilfully to a disease that may disqualify him before he has even a chance to use that battle training?

This soldier who becomes a victim of venereal disease might be your son or the kid from next door. He's somebody's son, somebody's brother, somebody's neighbor. Do you want any share in disabling him?

This drive against prostitution and all of its ugly ramifications is not just a wartime measure. Your Gov-



THIS?

or



THIS?

ernment, State and city, mean business on this score from now on. Men returning from months or years of service must have decent law-abiding towns to come back to.

It is just as important, if not more so, to protect them from disease now, as they are being demobilized and coming home to live, as to protect them when on their way overseas to fight, and possibly to die.

Your Government, State and city, are equally determined to protect the civilian—in wartime or peacetime.

A great Nation such as ours has no room in any community for tolerated law violators. Prostitution, regardless of how it is practiced, is a violation of the law and a health menace.

Do you want any share in promoting a vicious racket that involves girls and women in prostitution and makes them victims of the very disease they help to spread?

Think it over while you read "She Looked Clean" on the following pages. Here, a leading medical authority in the venereal disease field tells you why outward appearances don't mean a thing—

Why prostitution and venereal disease are bad business;

Why the Nation's law enforcement officers have closed more than 675 "red light" districts all over the country; and

Why you should help stop this traffic in possible death and destruction.

"SHE LOOKED CLEAN"

Why Repress and Suppress Prostitution?

This question is asked with great regularity by many officers and men in the armed forces, and by many law-enforcement officers. The moralist's answers do not always satisfy, and too frequently his lessons are forgotten.

Let us examine the real reasons why the Army, Navy, United States Public Health Service, and the Social Protection Division seek the repression and prevention of prostitution and promiscuity. Briefly, it is because they seek to lower the number of venereal disease patients in the

armed forces and industrial plants, thus increasing the effective work-hour average per man or woman.

"But why pick on the prostitute? Why not have houses of prostitution under regular medical inspection for both the inmates and the men visiting them?"

These two questions deserve logical answers. The average prostitute, to meet her financial obligations, must accommodate about 20 men per day. She finds it more profitable to serve two or three times that number. The prostitute is not in business for pleasure or for the benefit of mankind; she is in it for money—the more the better. It does not take a mathe-



The average "amateur prostitute" can contact only 3 to 5 men a night.

mathematical genius to figure out what a prolific spreader of venereal disease an infected prostitute can be. The average "good-time" girl or amateur

prostitute, at best, only contacts from 3 to 5 men a night. Her method is slower. Mathematically, the infected amateur is a far less prolific spreader of venereal disease than the professional. Both are dangerous and practically 100 percent become infected.

The natural question that follows is: "Doesn't the professional prostitute know how to take care of herself and thus keep herself from becoming infected, by means of douches, etcetera?"

The answer is simple and in the negative. Prostitutes of all kinds realize that pregnancy, for months at least, must put an end to their activities. Consequently, the few who are able to command relatively high fees have often resorted to douches in an

attempt to continue their careers without interruption. That they have frequently failed, we all know. Consider then the chances of avoiding venereal infections by their methods when the germ transmitting syphilis or gonorrhea is several hundred times smaller than the male sperm cell.

A thorough douche, according to

medical authorities, takes at least 20 minutes. Does a prostitute ever take that much time between patrons? No!

A prostitute can transmit gonorrhea, syphilis, and other venereal diseases without becoming self-infected. Even with a perfunctorily executed douche, her body will retain the germs of venereal disease from



MALE SPERM CELLS



SPIROCHETES



GONOCOCCI

Douches frequently fail to reach tiny male sperm cells and practically never reach venereal germs which are hundreds of times smaller. (A thorough douche according to

medical authorities requires 20 minutes. Did you ever hear of a prostitute taking that much time between patrons? Of course not!)

any of her preceding patrons who were infected. Each new customer will, in turn, be directly exposed to these germs; and add to them. This



Visualize 20 to 40 men, bathing in the same tub of water in one evening. (The risk of disease would be less in this loathsome comparison than the risk of venereal disease to 20 to 40 men employing the same prostitute in one evening.)

explains why a prostitute with syphilis, who is herself under treatment which renders her own disease non-infectious, is sometimes given as the source of a fresh syphilitic infection. Visualize, if you will, 20 to 40 men bathing in the same tub of water in one evening. Not a nice thought, but common sense tells us that various diseases might develop to these bathers. The same comparison may be drawn between a prostitute and her patrons of a single evening.

"But," you may say, "a doctor can examine the prostitute and certify whether or not she is infected!"

Properly educated, scientific, ethical, and honest physicians are unable to do this. A physician who certifies prostitutes as nonvenereal or noninfectious is either intentionally

dishonest or grossly incompetent. Why? Let us examine a few of the many reasons why this is a physical scientific impossibility.

First of all, it is necessary to know the definition of an incubation period. This is the period of time (in the case of syphilis) from the instant the syphilis germ passes between sex partners until signs on or in the body show up well enough to permit actual or suspected diagnosis. With syphilis, the incubation period averages about 21 days, and can vary from 10 to 90 days or longer. During this time there are no means whatsoever by which the disease can be diagnosed. In a well-regulated house of prostitution, therefore, we would have to isolate both the prostitute and the customer for a minimum of 90 days to be sure



Using the "smear test," able and honest doctors are unable to examine a prostitute and certify that she is **NOT** infected.



A woman may be venereally infected for 90 days before she discovers her plight. Yet all this time "She Looks Clean."

that neither was infected with syphilis. During the period of isolation, if it were properly conducted, they should be physically isolated from all other human beings. Ridiculous, isn't it? But let us go further.

At the end of the incubation period a chancre appears which is missed or not seen in at least 30 percent of female patients. It may not be, however, until several days or weeks after the first appearance of the chancre that the blood test becomes positive. Blood tests for syphilis taken before this period of time has elapsed are frequently negative. To what does it add up? The answer is obvious.

Now let us look at gonorrhea in the female. The incubation period for this disease is usually 3 to 5 days, but in some cases extends to 2 weeks.

The majority of women have few, if any, symptoms early in gonorrhea unless their internal organs are affected. Therefore, most of them have no occasion to seek the aid of a physician. But in this period she is a carrier. In the male, the early signs are obvious and practically unmistakable.

What about making the diagnosis in the female? It sounds simple—but in most cases it is like looking for a proverbial needle in the haystack. During intercourse a man comes in contact with those parts of a prostitute's body which are almost certain to contain the germs of gonorrhea. These germs usually live, grow, and multiply in millions of genital glands so minute they cannot be detected by the human eye. They are deeply im-

bedded, rarely reached by a doctor making a so-called "smear" examination by employing a swab. From that it can plainly be seen that the "smear test" is of restricted value. He certainly cannot say that the patient does not have gonorrhea. In order to say that positively, he would have to cut this part of the woman's body into little fine sections and examine each under the microscope very carefully.

Some of the outstanding medical authorities on the diagnosis of gonorrhea in women consider any such absolute diagnosis extremely difficult and unsatisfactory. In the majority of cases they have recently gone on record as favoring treatment of any woman for gonorrhea who has any clinical evidence of gonorrhea, re-



"I can't understand it. That girl sure looked clean." "That's funny—mine did too."

ardless of whether or not the germs are demonstrated. Yet some men feel that they can tell by just looking at the girl.—"She looked clean"—is the familiar lament of the victim of venereal disease.

We won't use someone else's tooth brush. We would despise anyone for offering us a cud of tobacco out of someone else's mouth. But truthfully, there is far less danger and hazard involved in such detestable practices than in sexual intercourse with a prostitute or a promiscuous woman.

THE "SEGREGATED DISTRICT" INCREASES DISEASE



The 1917 Experiment of City "X"

Before closing Red Light District 168 cases per 1,000 among troops. 826 prophylactic shots given per 1,000 men.

After closing, plus good policing, 5.42 cases per 1,000 men. Prophylactic shots dropped to 53 per 1,000.



The 1917 Navy Experiment in Haiti

Before district opened, 170 cases per 1,000 troops.

After district opened, 243 cases per 1,000 troops.

(This experiment was discontinued as a failure after one year.)

Federal Security Agency
Office of Community War Services
Social Protection Division
Washington 25, D. C.